

PTO/SB/30 (04-05)
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Request For Continued Examination (RCE) Transmittal

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/751,441-Conf. #2570	
Filing Date	January 6, 2004	
First Named Inventor	Bret K. Street	
Art Unit	2815	
Examiner Name	E. J. Wojciechowicz	
Attorney Docket Number	M4065.1005/P1005	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

o, 1995, or to any design	тарріюаціот.		
amendments enclo applicant does not amendment(s).	quired under 37 CFR 1.114 Note: If the RCE is proper, osed with the RCE will be entered in the order in which they to twish to have any previously filed unentered amendment(s) of	were filed unless applicant instructs otherwise. If entered, applicant must request non-entry of such	
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.			
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on			
ii. Other			
b. x Enclosed			
i. X Am	endment/Reply iii. Information	n Disclosure Statement (IDS)	
ii Affic	davit(s)/Declaration(s) iv Other		
2. Miscellaneous			
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a			
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)			
b. Other	-		
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.			
a. The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any			
overpayments to Deposit Account No I have enclosed a duplicate copy of this sheet.			
i. X RCE fee required under 37 CFR 1.17(e)			
ii. Extension of time fee (37 CFR 1.136 and 1.17)			
b. Check in the amount of \$ enclosed			
c. X Payment by credit card (Form PTO-2038 enclosed)			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature	A STATE OF THE STA	Date January 9, 2006	
Name (Print/Type)	Thomas J. D'Amico	Registration No. 28,371	

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